

510  
2/9

POSITION	INITIALS	ID NO.	DATE
	AS		05/31/00
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	AF	SC 825	07/20/00
RESPONSE FORMALITY REVIEW	ee	825	11/03

# INDEX OF CLAIMS

BEST AVAILABLE COPY

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	10/12/01	
2		2/3/02	
3		2/3/02	
4		2/3/02	
5		2/3/02	
6	✓	2/3/02	
7	✓	2/3/02	
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24	✓	2/3/02	
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30		2/3/02	
31		2/3/02	
32	✓	2/3/02	
33		2/3/02	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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